POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	7.12		3.16.00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	KD	68972	5/8/00

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
−	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date				Claim		Date		Claim		Date	
Final	Original					Final	Original			Final	Original		
	1						51				101		
	2						52				102		
	3						53				103		
	4						54				104		
	5						55				105		
	6						56				106		
	7						57				107		
	8						58				108		
	9						59				109		
	10						60				110		
	11						61				111		
	12						62				112		
	13						63				113		
	14						64				114		
	15						65				115		
	16						66				116		
	17						67				117		
	18						68				118		
	19						69				119		
	20						70				120		
	21						71				121		
	22						72				122		
	23						73				123		
	24						74				124		
	25						75				125		
	26						76				126		
	27						77				127		
	28						78				128		
	29						79				129		
	30						80				130		
	31						81				131		
	32						82				132		
	33						83				133		
	34						84				134		
	35						85				135		
	36						86				136		
	37						87				137		
	38						88				138		
	39						89				139		
	40						90				140		
	41						91				141		
	42						92				142		
	43						93				143		
	44						94				144		
	45						95				145		
	46						96				146		
	47						97				147		
	48						98				148		
	49						99				149		
	50						100				150		

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)